POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SC		4-2-97
O.I.P.E. CLASSIFIER		8	4-698
FORMALITY REVIEW	CY	69387	4-20-90

INDEX OF CLAIMS

✓ .... Rejected
= .... Allowed
— (Through numeral) Canceled
÷ .... Restricted

N .... Non-elected
I .... Interference
A .... Appeal
O .... Objected

Claim		Date											Claim		Date							Claim		Date					
Final	Original												Final	Original								Final	Original							
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	50													100									150							

If more than 150 claims or 10 actions
staple additional sheet here

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